

Quarter 4 - 2021



MILWAUKEE COUNTY  
DEPARTMENT OF HEALTH  
& HUMAN SERVICES

**BEHAVIORAL  
HEALTH SERVICES**

# CARS Quarterly Report

## POPULATION HEALTH

We continue to mature our population health metrics by enrollment. Notable amongst our improvement activities is our effort to expand our Individual Placement and Support Services (IPS) program, a supported employment program for individuals with behavioral health issues with a robust evidence base. This endeavor includes both increasing the capacity of our network to provide IPS services and administrative improvements to enhance our ability to track our provision of IPS services.

Amongst other key findings, our quality of life (QOL) data suggested that although our Black clients entered services with lower QOL relative to white clients (32.64% vs. 36.50%, respectively), their greater rate of improvement (79.78%) relative to white clients (46.99%) resulted in a greater proportion of Black clients experiencing “Good” or “Very Good” quality of life as of their last assessment.

## CLIENT EXPERIENCE

This iteration of the CARS Quarterly Report includes a new measure and several key findings in the Client Experience Aim. Previous versions of the report included a measure looking at the number of CARS clients who received a first service within 7 days of their initial assessment at a CARS access point. This measure suffered from several limitations, in particular the data were restricted to those clients who received a CARS community service, not clients who were assessed but who may not have received a subsequent service. Our new measure represents an improvement because it is focused on all clients whose first service within their enrollment occurred at a CARS access point, regardless of whether they received a subsequent CARS community service. We believe it is therefore more representative of the number of “new” clients who initially contact and ultimately engage in CARS services.

Another notable observation this quarter was a rise in referrals to the CARS Access Points (reversing the downward trend of the previous two quarters), due in large part to a significant increase (17.74%) in the number of Black clients seeking services.

## COST OF CARE

CARS is in the process of revising and refining the ways in which we track and categorize the services we provide so that we can better understand how we allocate our funds. This effort will help to support the redesign of our system of care, including strategic fiscal investments that are better aligned to the social determinants of health. This work will be detailed in future iterations of the Quality Report and will also be represented on internal department dashboards.

## STAFF QUALITY OF WORK LIFE

The Staff Quality of Life committee in CARS recently held a second World Café in early February of 2022, in which they solicited staff feedback on how to improve the quality of the work experience for CARS staff. The first World Café resulted in a number of positive recommendations, including teleworking ideas and guidance, as well as staff engagement activities. The data gathered at the most recent World Café will be summarized and presented to CARS Leadership to inform and drive innovative initiatives and policies to ensure that CARS can continue to engage and retain its current skilled workforce, as well as attract new talent in the future.

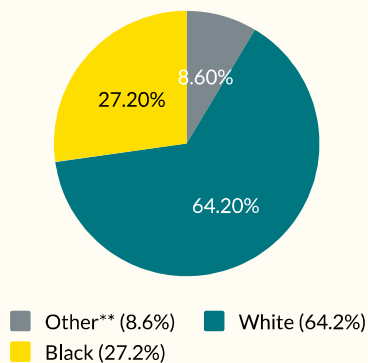
## NEXT STEPS

As noted previously, CARS will implement a System-Wide CQI Project focused on racial equity in 2022. This effort is currently underway, and an implementation workgroup has been convened and is meeting regularly. The CARS R&E Team will provide direct support for this initiative and will continue to present progress updates at future MHB Quality Committee meetings.

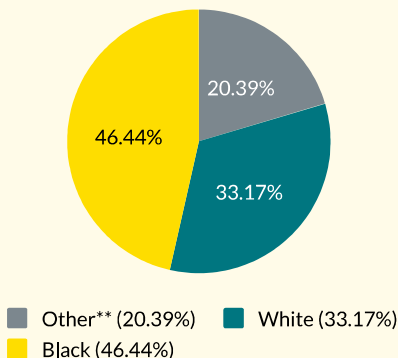
# Demographic Information of the Population We Serve

This section outlines demographics of the consumers CARS served last quarter compared to the County population.

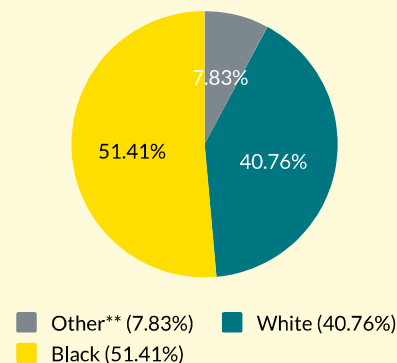
## Race (Milwaukee County)\*



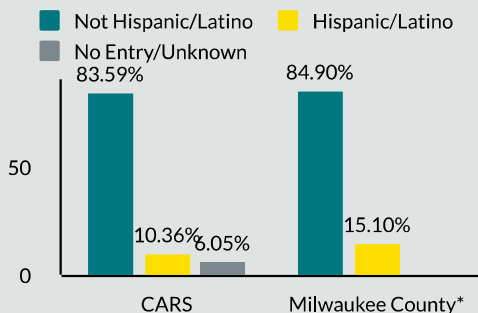
## Race of MKE County at or Below 100% Poverty Level



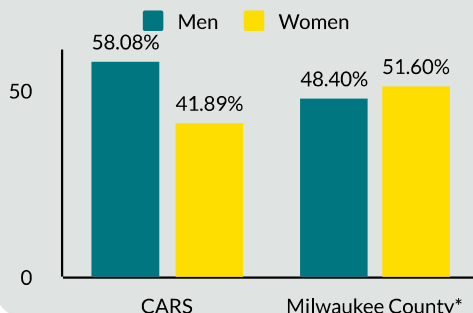
## Race (CARS)



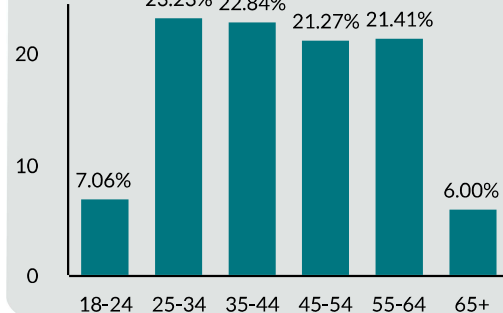
## Ethnicity



## Gender

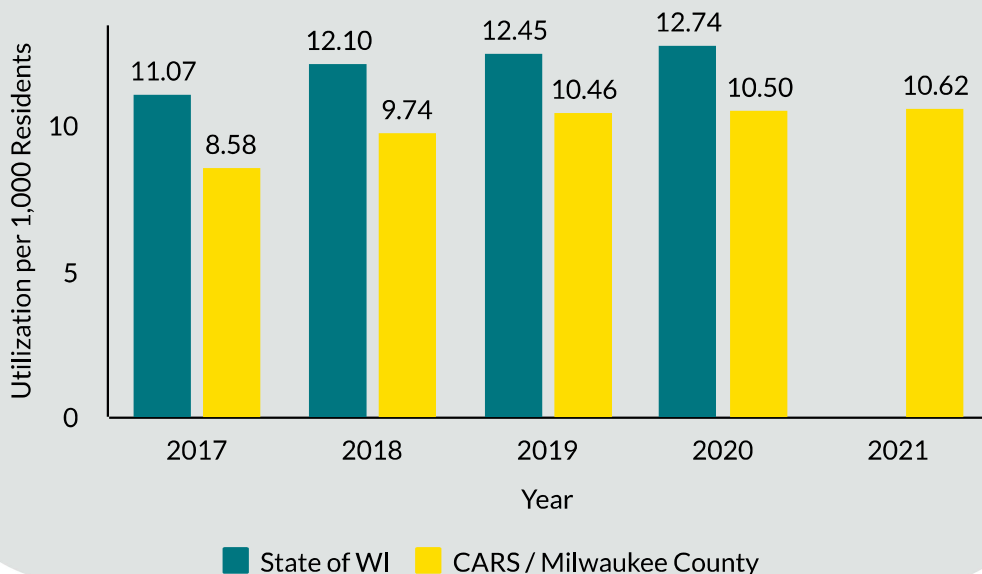


## Age



## Community Utilization per 1,000 Residents

The graph to the right depicts how many individuals are served in the State of Wisconsin vs. Milwaukee County (by CARS) per 1,000 residents. Milwaukee County data was calculated by looking at how many unique clients were served in CARS and the overall Milwaukee County population. State of Wisconsin data was obtained from the Uniform Reporting System (URS). As you can see, while the State of Wisconsin is serving more individuals per 1,000 than CARS serves in Milwaukee County, the rate served by CARS has steadily increased each year. It is important to note that the CARS rates do not include Community Crisis Services, which may lead to an underestimation of total community utilization rates relative to the State rates.

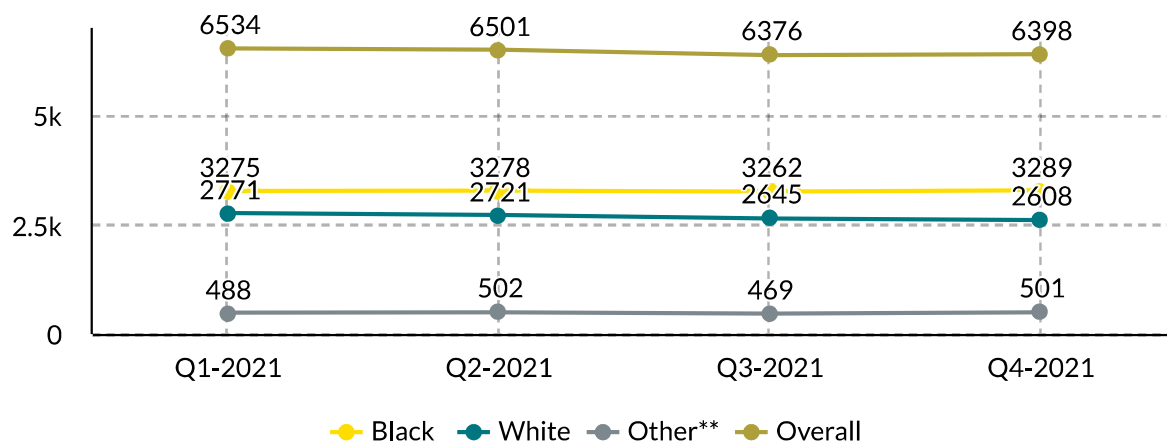


\*Comparable data from United States Census Bureau, which can be found at: <https://www.census.gov/quickfacts/fact/table/milwaukeecountywisconsin/PST045217#qf-flag-Z>

\*\*"Other" encompasses small percentages of indicated racial identity including "Alaskan Native/American Indian", "Asian", "Biracial", "Native Hawaiian/Pacific Islander", and "Other"

## Volume Served

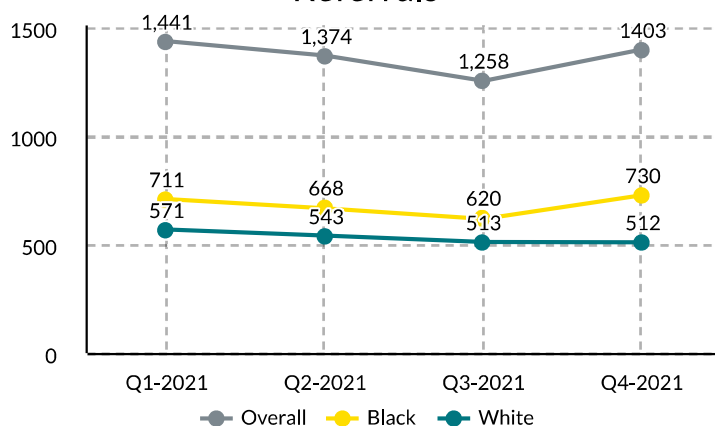
### Volume Served by Race



## Referrals

## Time to First Service

### Referrals



### Access to Service

**28.69%**

Percentage\* of clients who began their enrollment at a CARS Access Point who received a CARS community service within the first 30 days (202/704)

\* Please note that not all clients who are assessed need or are eligible to receive CARS community services, therefore the expectation is not 100%. CARS R&E Team is working to develop access targets for future reports.

## Average Consumer Satisfaction Score (Range from 1-5)

**4.52**

average for all consumers (n=802)

**4.49**

average for Black consumers (n=430)

**4.54**

average for White consumers (n=251)

**4.60**

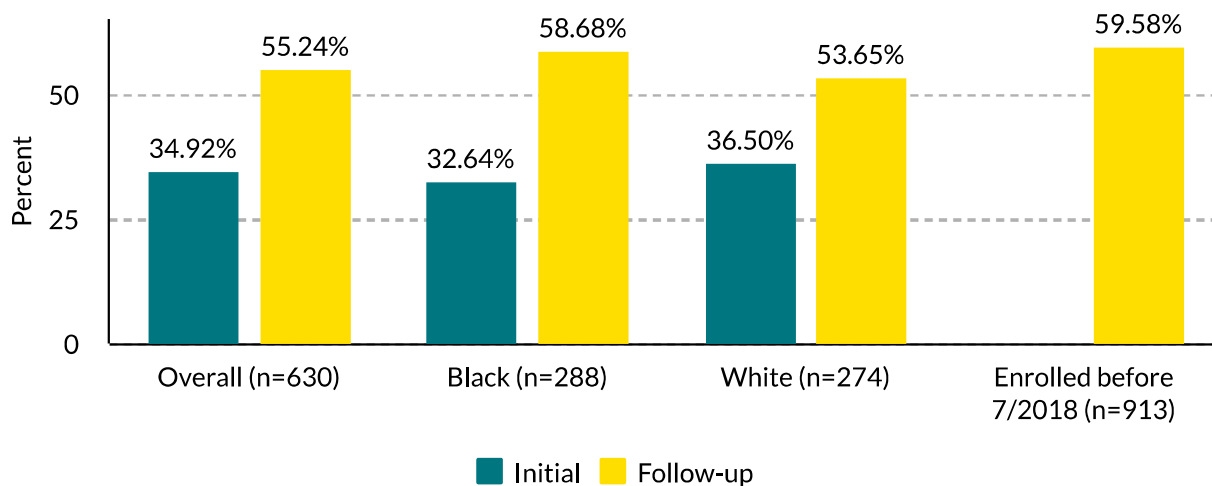
average for "other" consumers (n=121)

## Population Health

### Change Over Time - Client Enrollment

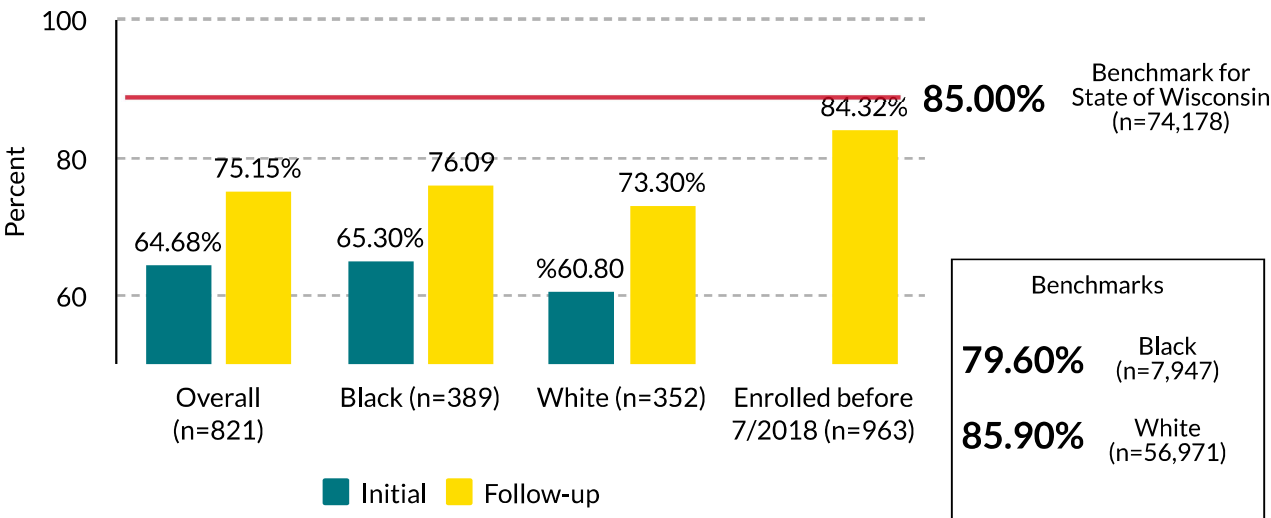
Percent of clients selecting "Good" or "Very Good" Quality of Life Overall and by Race

Average duration of enrollment: 491.58 days



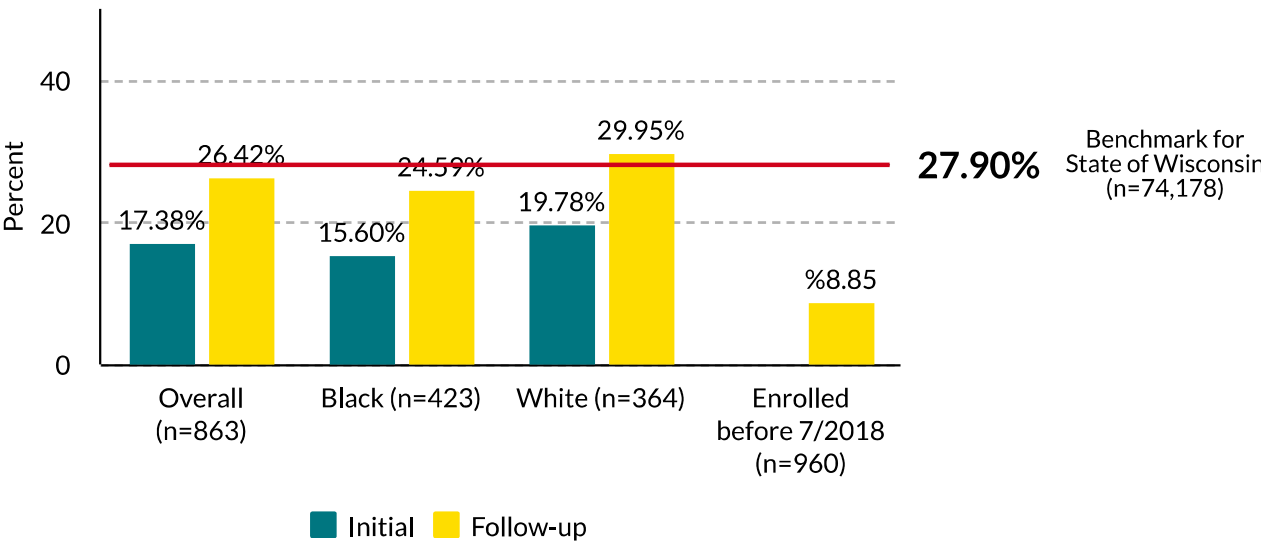
Percent with a Private Residence Overall and by Race

Average duration of enrollment: 465.90 days



Percent Employed Overall and by Race

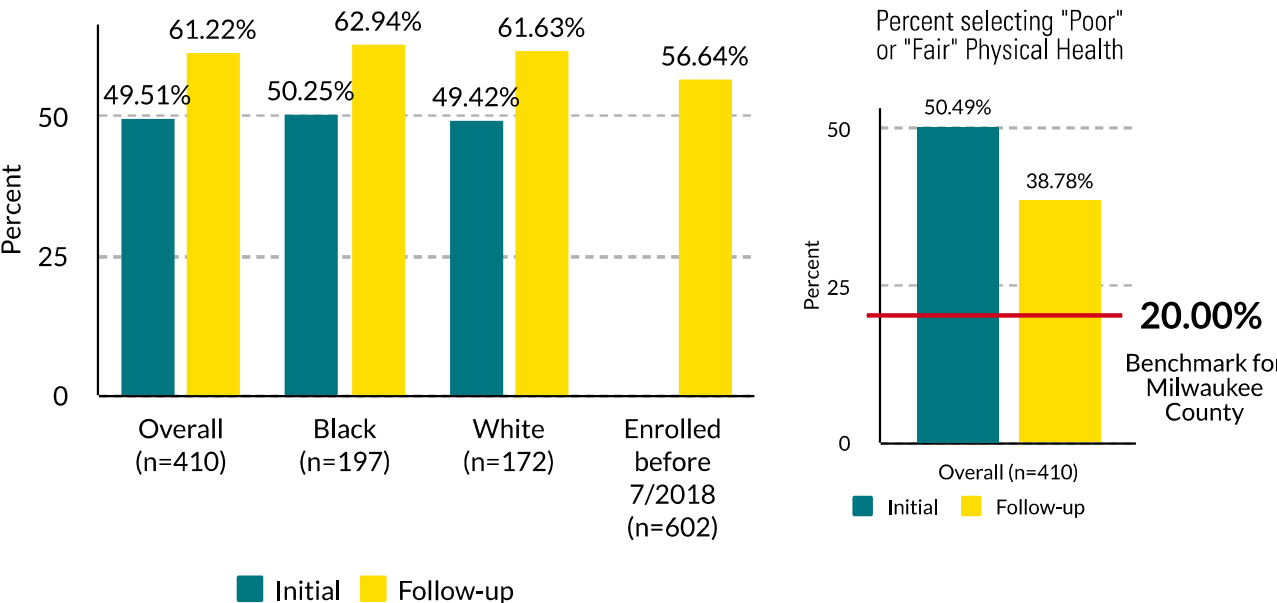
Average duration of enrollment: 457.16 days



Percent selecting "Good", "Very Good" or "Excellent" Physical Health Overall and by Race

Average duration of enrollment: 477.03 days

Percent selecting "Poor" or "Fair" Physical Health



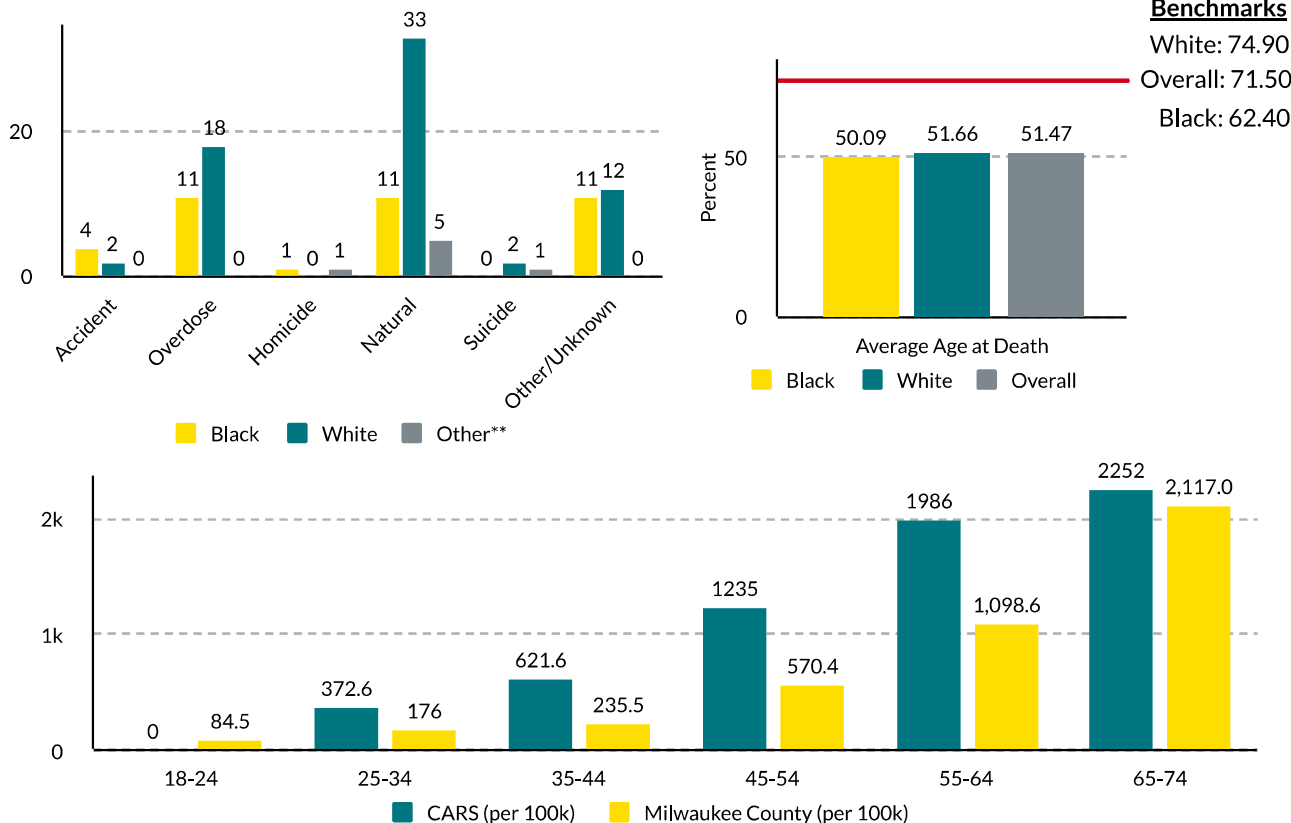
## Cause of Death by Race

One quarter lag in reporting.  
For deaths between Q4-2020 and Q3-2021

## Average Age at Death

## Death Rate (per 100,000) by Age Range

CARS number adjusted for comparison against Milwaukee County<sup>^</sup>

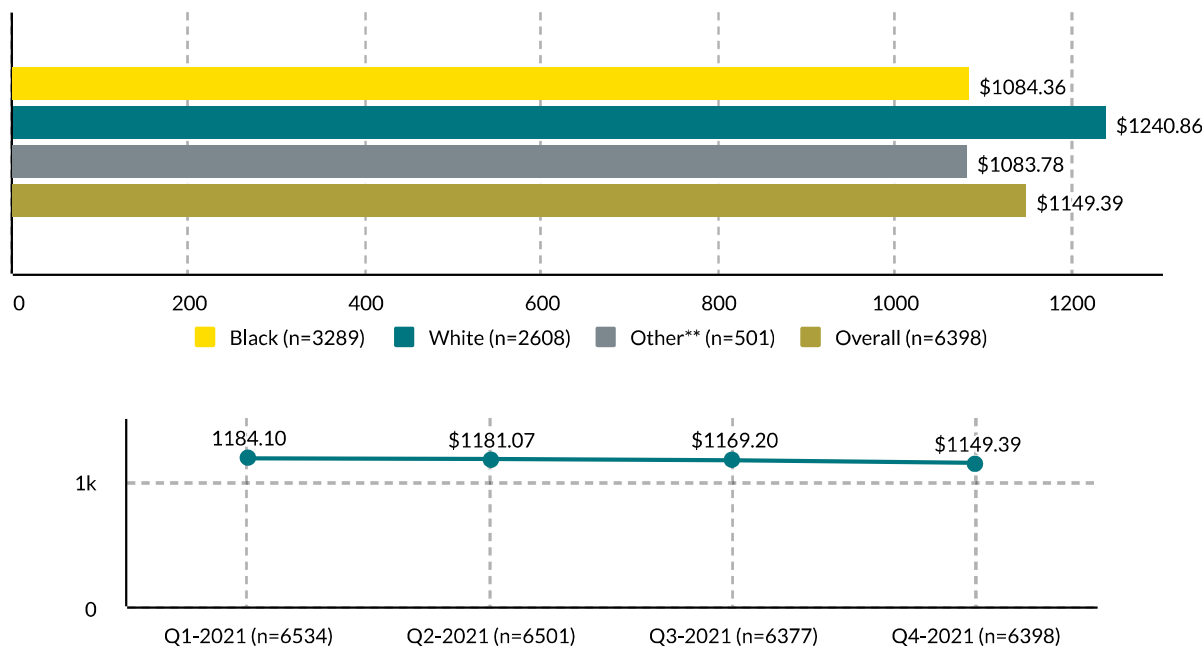


# Domain: Cost of Care

## Average Cost per Consumer per Month for Q4 by Race

"n" refers to an average of the number of unique consumers served per month for the quarter

## Average Cost per Consumer per Month by Quarter



# Domain: Staff Well-Being

## Turnover

**7.84%**

CARS turnover rate

## Staff Quality of Life

**20.00%**

Turnover rate for government employees (per year)<sup>^^</sup>

The Staff Quality of Life committee in CARS recently held a second World Café in early February of 2022, in which they solicited staff feedback on how to improve the quality of the work experience for CARS staff. The data gathered at the most recent World Café will be summarized and presented to CARS Leadership to inform and drive innovative initiatives and policies to ensure that CARS can continue to engage and retain its current skilled workforce, as well as attract new talent in the future.

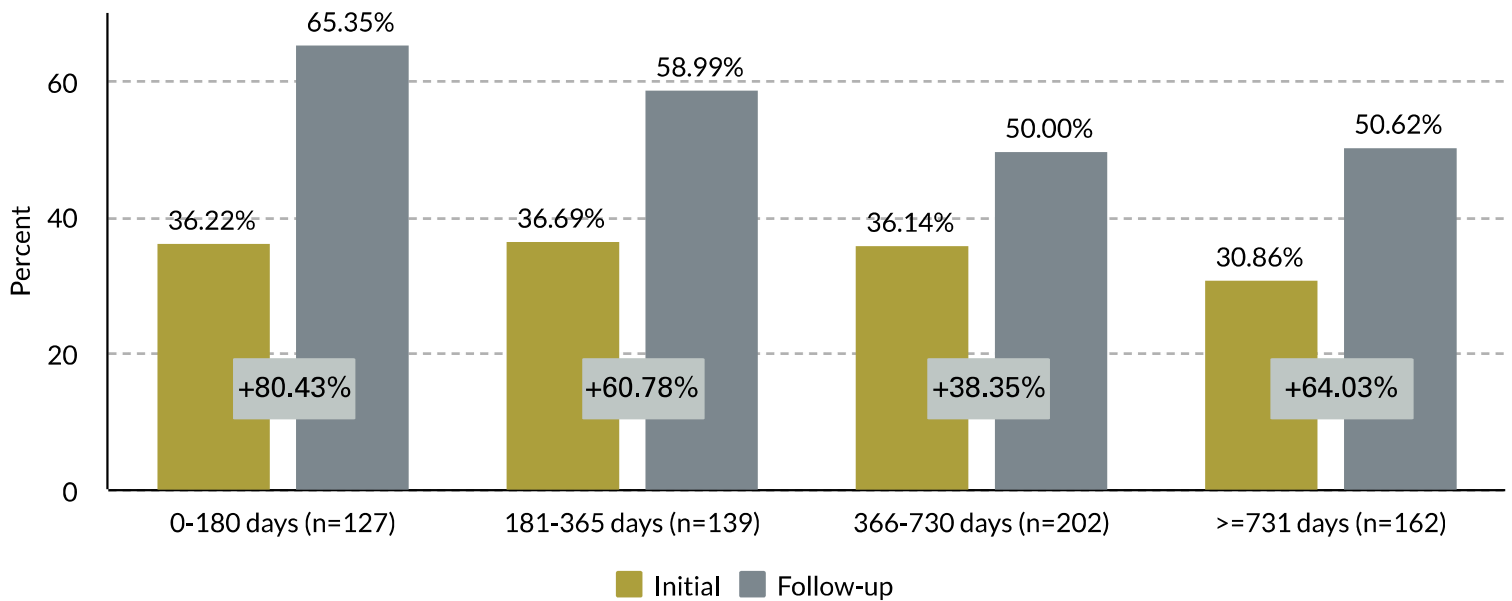
## Metric Definitions

|                      |   |
|----------------------|---|
| Access to Services   | This measure examines the number of clients who received their first service at a CARS Access Point and then received a CARS community service within 30 days, divided by the total clients who received their first service at a CARS Access Point.  |
| Average Age at Death | Death data is reported as an aggregate of the past four quarters, with a one-quarter lag. Average age at death for all causes of death.<br><br>Benchmarks from 2019 Milwaukee County Mortality Data - Wisconsin Interactive Statistics on Health (WISH)   |
| Cause of Death       | Death data is reported as an aggregate of the past four quarters, with a one-quarter lag. Causes reported by the Milwaukee County Examiner when available. For those without an examiner report, cause of death reported by CARS is used.   |
| Change Over Time     | Change over time, through client enrollment, looks at clients who had their initial PPS within 60 days of enrollment and their follow-up PPS during the observation quarter. Some metrics are broken down by cohorts, which are determined by length of enrollment between their initial PPS and their latest PPS during the observation quarter.   |
| Client Experience    | Implementation of the new, more succinct Client Experience has begun. The survey ranges from 4-10 questions, depending on the program, and all questions range from 1="strongly disagree" to 5="strongly agree". The survey is currently being utilized in all CARS programs with the exception of CCS, CBRF, Adult Family Home, and Medication Assisted Treatment (MAT).                 |
| Cost of Care         | The average cost per consumer per month within each quarter for CARS services received by CARS consumers (not including inpatient and crisis). This is not separated out by funding stream or limited to those dollars spent by Milwaukee County on these services. The "n" is an average of the unique number of consumers served per month for the 3 months in the observation quarter. |
| Death Rate           | The CARS death rate has been adjusted to a rate per 100,000 to compare with Milwaukee County death data.<br><br>^^Comparison death data from Wisconsin Interactive Statistics on Health (WISH) data query system, 2019 mortality data   |
| Employment           | Percent of current employment status of unique clients reported as "full or part time employment" or "supported competitive employment"<br><br>^^Benchmark data from the SAMHSA Uniform Reporting System - Mental Health Community Services Block Grant 2020 State Summary Report   |
| Private Residence    | Percent of clients who reported their current living situation as a private residence.<br><br>^^Benchmark data from the SAMHSA Uniform Reporting System - Mental Health Community Services Block Grant 2020 State Summary Report  |
| Quality of Life      | This is a self-reported measure based on the question on the Comprehensive Assessment. Graphs shows the percentage of people that stated that their quality of life was "good" or "very good".  |
| Referrals            | Total number of referrals at community-based and internal Access Points per quarter.  |
| Self-Rated Health    | This is a self-reported measure based on the question on the Comprehensive Assessment. The graph shows the percentage of people that said that their physical health was "good", "very good" or "excellent".<br>Benchmark from County Health Rankings   |
| Turnover             | Turnover is calculated by looking at the total number of staff who have left over the previous four quarters, divided by the average number of employees per month, for the previous four quarters<br>^^Source: Bureau of Labor Statistics<br>( <a href="https://www.bls.gov/news.release/jolts.t16.htm">https://www.bls.gov/news.release/jolts.t16.htm</a> )                             |
| Volume Served        | Service volume has been consolidated into one category to avoid potential duplication of client counts due to involvement in both MH and AODA programs.   |

\*\*\*Other" encompasses small percentages of indicated racial identity including "Alaskan Native/American Indian", "Asian", "Biracial", "Native Hawaiian/Pacific Islander", and "Other"

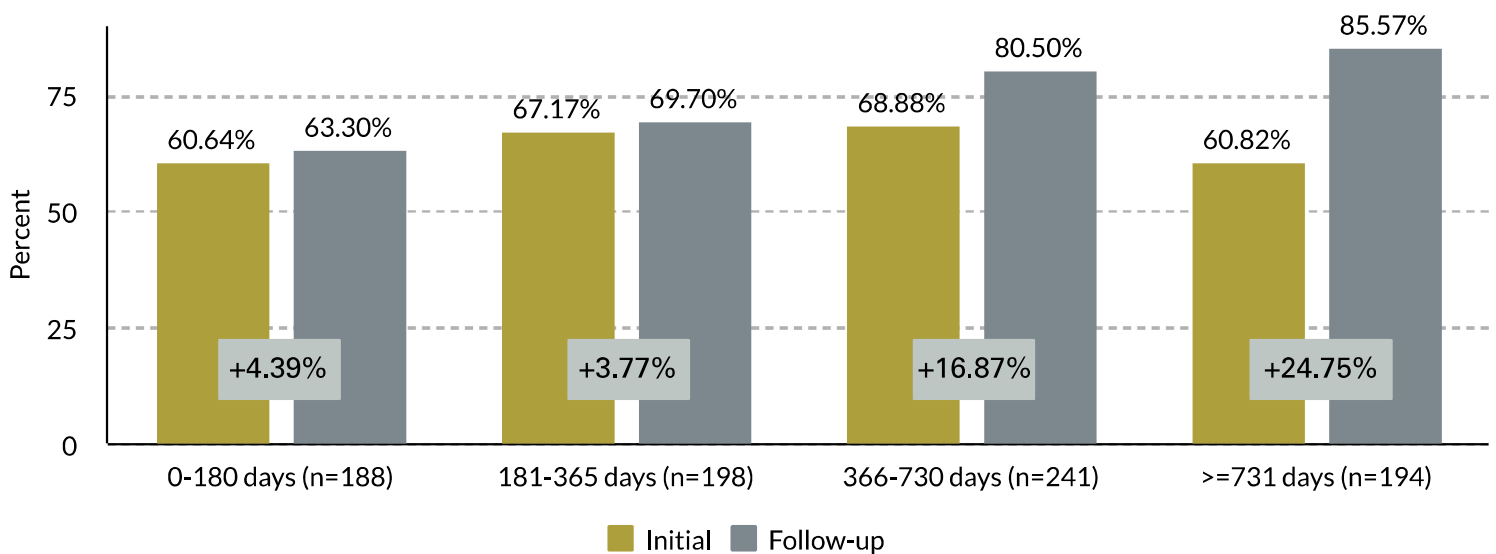
### Percent of Clients selecting "Good" or "Very Good" Quality of Life by Length of Enrollment

In contrast to previous reports, the shortest duration cohort experienced the greatest degree of improvement in quality of life, followed by the cohort with the longest duration (similar to previous reports).



### Percent of Clients with a Private Residence

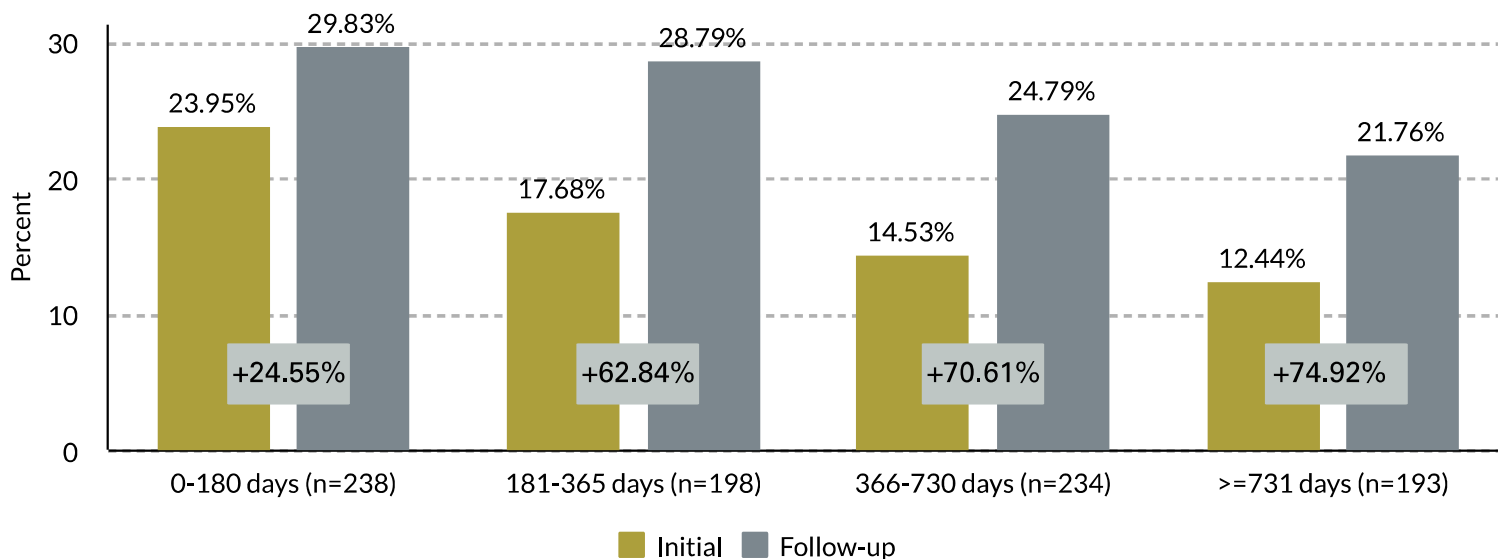
Consistent with previous reports, clients enrolled longer appear to have higher rates of private residence than clients enrolled for shorter lengths of time.





### Percent of Clients Employed

Although the rates of change are higher in longer lengths of enrollment, this is likely due to a larger proportion of individuals in longer enrollment cohorts beginning their enrollments with lower rates of employment.



### Percent of Clients selecting "Good", "Very Good" or "Excellent" Physical Health

This graph shows no clear trend in terms of rate of change between cohorts. Cohorts with longer enrollments did start with lower ratings of physical health, likely influencing their higher rates of change.

